



22783 U.S. PTO

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PTO/SB/05 (08-03)

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| | | |
|--|------------------------|--|
| UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b)) | Attorney Docket No. | 29936/39902 |
| | First Inventor | Seok Cheol Yoon |
| | Title | REPAIR FUSE BOX OF SEMICONDUCTOR DEVICE |
| | Express Mail Label No. | EV 233438038 US |

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|---|--|
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) |
| 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) |
| 3. <input checked="" type="checkbox"/> Specification [Total Pages 8] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure | a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 3] | ACCOMPANYING APPLICATION PARTS |
| 5. Oath or Declaration [Total Sheets 3] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). | 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of (when there is an assignee) Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: |
| 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.:

Prior application information: Examiner

Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

| | | | | | |
|---|---|--|----------------|----------|----------------|
| 19. CORRESPONDENCE ADDRESS | | | | | |
| <input checked="" type="checkbox"/> Customer Number: 04743 | | OR <input type="checkbox"/> Correspondence address below | | | |
| Name | MARSHALL, GERSTEIN & BORUN LLP Aaron M. Peters | | | | |
| Address | 233 S. Wacker Drive, Suite 6300 Sears Tower | | | | |
| City | Chicago | State | IL | Zip Code | 60606-6357 |
| Country | US | Telephone | (312) 474-6300 | Fax | (312) 474-0448 |

| | | | |
|-------------------|-----------------|-----------------------------------|-------------------|
| Name (Print/Type) | Aaron M. Peters | Registration No. (Attorney/Agent) | 48,801 |
| Signature | | Date | December 23, 2003 |

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Dated: December 23, 2003

Signature: (Richard Zimmermann)

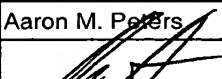
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**FEE TRANSMITTAL
for FY 2004**

Effective 10/01/2003, Patent fees are subject to annual revision.

| | |
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| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | Complete if Known |
| TOTAL AMOUNT OF PAYMENT | Application Number Not Yet Assigned |
| (\$) 770.00 | Filing Date December 23, 2003 |
| | First Named Inventor Seok Cheol Yoon |
| | Examiner Name Not Yet Assigned |
| | Art Unit N/A |
| | Attorney Docket No. 29936/39902 |

| METHOD OF PAYMENT (check all that apply) | | FEE CALCULATION (continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--------------------------------------|---|--------------|-----------------|----------|----------|----------|--|--|----------|----------|------------------------|--------|----------|----------|-----------------------------------|--|----------|----------|---------------------------------------|--|----------|----------|--|--|----------|---------|--|--|---------------------|--|-------------|--------|--|--|
| <input checked="" type="checkbox"/> Check | <input type="checkbox"/> Credit Card | 3. ADDITIONAL FEES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Money Order | <input type="checkbox"/> Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> None | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Deposit Account: Deposit Account Number: 13-2855 Deposit Account Name: MARSHALL, GERSTEIN & BORUN LLP | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| The Director is authorized to: (check all that apply) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Charge fee(s) indicated below | | <input checked="" type="checkbox"/> Credit any overpayments | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FEE CALCULATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. BASIC FILING FEE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Description</th><th>Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee Code</th><th></th><th></th></tr></thead><tbody><tr><td>1001 770</td><td>2001 385</td><td>Utility filing fee</td><td>770.00</td></tr><tr><td>1002 340</td><td>2002 170</td><td>Design filing fee</td><td></td></tr><tr><td>1003 530</td><td>2003 265</td><td>Plant filing fee</td><td></td></tr><tr><td>1004 770</td><td>2004 385</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005 160</td><td>2005 80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="2">SUBTOTAL (1)</td><td>(\$)</td><td>770.00</td></tr></tbody></table> | | Large Entity | Small Entity | Fee Description | Fee Paid | Fee Code | Fee Code | | | 1001 770 | 2001 385 | Utility filing fee | 770.00 | 1002 340 | 2002 170 | Design filing fee | | 1003 530 | 2003 265 | Plant filing fee | | 1004 770 | 2004 385 | Reissue filing fee | | 1005 160 | 2005 80 | Provisional filing fee | | SUBTOTAL (1) | | (\$) | 770.00 | | |
| Large Entity | Small Entity | Fee Description | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Code | Fee Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1001 770 | 2001 385 | Utility filing fee | 770.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1002 340 | 2002 170 | Design filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1003 530 | 2003 265 | Plant filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1004 770 | 2004 385 | Reissue filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1005 160 | 2005 80 | Provisional filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (1) | | (\$) | 770.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Description</th><th>Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee Code</th><th></th><th></th></tr></thead><tbody><tr><td>1202 18</td><td>2202 9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>1201 86</td><td>2201 43</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>1203 290</td><td>2203 145</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>1204 86</td><td>2204 43</td><td>** Reissue independent claims over original patent</td><td></td></tr><tr><td>1205 18</td><td>2205 9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="2">SUBTOTAL (2)</td><td>(\$)</td><td>0.00</td></tr></tbody></table> | | Large Entity | Small Entity | Fee Description | Fee Paid | Fee Code | Fee Code | | | 1202 18 | 2202 9 | Claims in excess of 20 | | 1201 86 | 2201 43 | Independent claims in excess of 3 | | 1203 290 | 2203 145 | Multiple dependent claim, if not paid | | 1204 86 | 2204 43 | ** Reissue independent claims over original patent | | 1205 18 | 2205 9 | ** Reissue claims in excess of 20 and over original patent | | SUBTOTAL (2) | | (\$) | 0.00 | | |
| Large Entity | Small Entity | Fee Description | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Code | Fee Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1202 18 | 2202 9 | Claims in excess of 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1201 86 | 2201 43 | Independent claims in excess of 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1203 290 | 2203 145 | Multiple dependent claim, if not paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1204 86 | 2204 43 | ** Reissue independent claims over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1205 18 | 2205 9 | ** Reissue claims in excess of 20 and over original patent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (2) | | (\$) | 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims 4 -20** = | | Extra Claims Fee from below Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent Claims 1 -3** = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Multiple Dependent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *Reduced by Basic Filing Fee Paid | | SUBTOTAL (3) (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | |
|---------------------|---|-----------------------------------|-------------------|
| SUBMITTED BY | | (Complete if applicable) | |
| Name (Print/Type) | Aaron M. Peters | Registration No. (Attorney/Agent) | 48,801 |
| Signature |  | Telephone | (312) 474-6608 |
| | | Date | December 23, 2003 |

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Dated: December 23, 2003

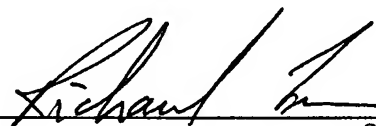
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Typed or printed name of person signing Certificate

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Application Data Sheet